COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. X ☐ Addressee Print your name and address on the reverse so that we can return the card to you. C. Date of Delivery B. Beceived by (Printed Name) Attach this card to the back of the mailpiece, 1/5/08 or on the front if space permits. B. Is delivery address different from item 1? ☐ Yes ☐ No 1. Article Addressed to: If YES, enter delivery address below: Campbell County Commissioners c/o Dan Coolidge, Chairman 500 S. Gillette Ave., Ste. 1100 Gillette, WY 82716 Service Type Certified Mail ☐ Express Mall □ Return Receipt for Merchandise Registered SEP 0 2 2008 ☐ Insured Mail ☐ C.O.D. Docket # SDWA-08-2008-0097 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7005 0390 0000 4848 4194 (Transfer from service label) 102595-02-M-1540 PS Form 3811, February 2004 Domestic Return Receipt COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. Also complete □ Agent item 4 if Restricted Delivery is desired. □ Addressee Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to ☐ No If YES, enter delivery address below: Southside Well Improvement and Service District c/o Rex Markley, Chairman P.O. Box 3943, 445 Sinclair Street Gillette, WY 82719 82717 3. Service Type Certified Mail Registered □ Express Mall ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. Docket # SOWA-08-2008-0097 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7005 0390 0000 4848 4187 (Transfer from service label) 102595-02-M-1540 Domestic Return Receipt PS Form 3811, February 2004